Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

2002 Pl 8305 CBG

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			12				1	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	
то	TAL CHARGEA	BLE CLAIMS	/2 minus 20= *)		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	3 minus 3 = *					X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	750	
•	CLAIMS AS AMENDED - PART II							SMALL E	=NTITV	OR.	OTHER SMALL I	
	· ·	(Column 1) CLAIMS	1	(Colur HIGH		(Column 3)	l r	JMALL		О 1 I I	OMALL!	
AMENDMENTA		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**.	• .	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AIM	=		X42=		OR	X84=	
	THOTTHESE	IVIATION OF IM	JETH LE DET	CNOCINI	CLANVI			+140=		OR	+280=	
	•	•					•	TOTAL		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE			ADUIT, FEE	
		CLAIMS		HIGH		(Column 5)	l r	<u></u>	ADDI-	·		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	440			.000	
						•		+140=		OR	+280=	
		•						TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)	The second of the second	(Colu	mn 2)	(Column 3)		•			•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										 	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT, FEE	
		nber Previously Pa					er fou	ind in the app	oropriate bo	k in co	lumn 1.	